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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

K35A0614

Total Pages

First Named Inventor or Application Identifier

SCOTT T. HUGHES

Express Mail Label No.

EI266879877US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)
2. ☒ Specification [Total Pages 12]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3. ☒ Drawing(s) (35 USC 113) [Total Sheets 7]  
 \_\_\_ Formal \_\_\_X\_ Informal
4. Oath or Declaration [Total Pages ]
  - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)  
[Note Box 5 below]
    - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
5. ☐ Incorporation By Reference (useable if Box 4b is checked)  
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6. ☐ Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Copy
  - b. ☐ Paper Copy (identical to computer copy)
  - c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

8. ☐ Assignment Papers (cover sheet & document(s))
9. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
10. ☐ English Translation Document (if applicable)
11. ☒ Information Disclosure Statement (IDS)/PTO-1449 [6] Copies of IDS Citations
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
14. ☐ Small Entity ☐ Statement filed in prior application, Status still proper and desired
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Other: \_\_\_\_\_

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_/\_\_\_\_\_

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|  |  |  |  |
|--|--|--|--|
| <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <p style="font-size: small; margin: 5px 0;">Note: Effective October 1, 1997.<br/>Patent fees are subject to annual revision.</p> |  | <b>Complete if Known</b>   |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>690.00</b>  |  | <b>Application Number</b> UNKNOWN<br><b>Filing Date</b> HEREWITH<br><b>First Named Inventor</b> SCOTT T. HUGHES<br><b>Group Art Unit</b> UNKNOWN<br><b>Examiner Name</b> UNKNOWN<br><b>Attorney Docket Number</b> K35A0614 |  |

| <h3 style="text-align: center; margin: 0;">METHOD OF PAYMENT (check one)</h3> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: <b>23-1209</b></p> <p>Deposit Account Name: <b>WESTERN DIGITAL CORPORATION</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17    <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance</p> <p>2. <input type="checkbox"/> Payment Enclosed:<br/> <input type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other             </p> <h3 style="text-align: center; margin: 10px 0;">FEE CALCULATION</h3> <div style="border: 1px solid black; padding: 5px;"> <h4>1. FILING FEE</h4> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101 690</td><td>201 345</td><td>Utility filing fee</td><td style="text-align: right;">690.00</td></tr> <tr><td>106 310</td><td>206 155</td><td>Design filing fee</td><td></td></tr> <tr><td>107 480</td><td>207 240</td><td>Plant filing fee</td><td></td></tr> <tr><td>108 690</td><td>208 345</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114 150</td><td>214 75</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="3" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td style="text-align: right;"><b>(\$ 690.00)</b></td> </tr> </tbody> </table> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <h4>2. CLAIMS</h4> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Total Claims</th> <th>Extra</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>10</td> <td>-20 = 0</td> <td>X 18 =</td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>2 - 3 = 0</td> <td>X 78 =</td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td></td> <td>X</td> <td></td> </tr> </tbody> </table> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <h4>Large Entity Small Entity</h4> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>103 18</td><td>203 9</td><td>Claims in excess of 20</td></tr> <tr><td>102 78</td><td>202 39</td><td>Independent claims in excess of 3</td></tr> <tr><td>104 260</td><td>204 130</td><td>Multiple dependent claim</td></tr> <tr><td>109 78</td><td>209 39</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110 18</td><td>210 9</td><td>Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (2)</b> (\$ )</p> </div> </div> | Large Entity Fee Code (\$) | Small Entity Fee Code (\$)   | Fee Description    | Fee Paid | 101 690 | 201 345 | Utility filing fee | 690.00 | 106 310 | 206 155 | Design filing fee |  | 107 480 | 207 240 | Plant filing fee |  | 108 690 | 208 345 | Reissue filing fee |  | 114 150 | 214 75 | Provisional filing fee |  | <b>SUBTOTAL (1)</b> |  |  | <b>(\$ 690.00)</b> | Total Claims | Extra | Fee from below | Fee Paid | 10 | -20 = 0 | X 18 = | 0.00 | Independent Claims | 2 - 3 = 0 | X 78 = | 0.00 | Multiple Dependent Claims |  | X |  | Fee Code (\$) | Fee Code (\$) | Fee Description | 103 18 | 203 9 | Claims in excess of 20 | 102 78 | 202 39 | Independent claims in excess of 3 | 104 260 | 204 130 | Multiple dependent claim | 109 78 | 209 39 | Reissue independent claims over original patent | 110 18 | 210 9 | Reissue claims in excess of 20 and over original patent | <h3 style="text-align: center; margin: 0;">FEE CALCULATION (continued)</h3> <div style="border: 1px solid black; padding: 5px;"> <h4>3. ADDITIONAL FEES</h4> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105 130</td><td>205 65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127 50</td><td>227 25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>139 130</td><td>139 130</td><td>Non-English specification</td><td></td></tr> <tr><td>147 2,520</td><td>147 2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112 920*</td><td>112 920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113 1,840*</td><td>113 1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115 110</td><td>215 55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116 380</td><td>216 190</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117 870</td><td>217 435</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118 1,360</td><td>218 680</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128 1,850</td><td>228 925</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119 300</td><td>219 150</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120 300</td><td>220 150</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121 260</td><td>221 130</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138 1,510</td><td>138 1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140 110</td><td>240 55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141 1,210</td><td>241 660</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142 1,210</td><td>242 605</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143 430</td><td>243 215</td><td>Design issue fee</td><td></td></tr> <tr><td>144 580</td><td>244 290</td><td>Plant issue fee</td><td></td></tr> <tr><td>122 130</td><td>122 130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123 50</td><td>123 50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126 240</td><td>126 240</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581 40</td><td>581 40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146 690</td><td>246 345</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149 690</td><td>249 345</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td colspan="3">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="3">Other fee (specify) _____</td><td></td></tr> <tr> <td colspan="3" style="text-align: right;"><b>SUBTOTAL (3)</b></td> <td style="text-align: right;"><b>(\$ )</b></td> </tr> </tbody> </table> </div> <p style="font-size: x-small;">* Reduced by Basic Filing Fee Paid</p> | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid | 105 130 | 205 65 | Surcharge - late filing fee or oath |  | 127 50 | 227 25 | Surcharge - late provisional filing fee or cover sheet. |  | 139 130 | 139 130 | Non-English specification |  | 147 2,520 | 147 2,520 | For filing a request for reexamination |  | 112 920* | 112 920* | Requesting publication of SIR prior to Examiner action |  | 113 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action |  | 115 110 | 215 55 | Extension for reply within first month |  | 116 380 | 216 190 | Extension for reply within second month |  | 117 870 | 217 435 | Extension for reply within third month |  | 118 1,360 | 218 680 | Extension for reply within fourth month |  | 128 1,850 | 228 925 | Extension for reply within fifth month |  | 119 300 | 219 150 | Notice of Appeal |  | 120 300 | 220 150 | Filing a brief in support of an appeal |  | 121 260 | 221 130 | Request for oral hearing |  | 138 1,510 | 138 1,510 | Petition to institute a public use proceeding |  | 140 110 | 240 55 | Petition to revive - unavoidable |  | 141 1,210 | 241 660 | Petition to revive - unintentional |  | 142 1,210 | 242 605 | Utility issue fee (or reissue) |  | 143 430 | 243 215 | Design issue fee |  | 144 580 | 244 290 | Plant issue fee |  | 122 130 | 122 130 | Petitions to the Commissioner |  | 123 50 | 123 50 | Petitions related to provisional applications |  | 126 240 | 126 240 | Submission of Information Disclosure Stmt |  | 581 40 | 581 40 | Recording each patent assignment per property (times number of properties) |  | 146 690 | 246 345 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 690 | 249 345 | For each additional invention to be examined (37 CFR 1.129(b)) |  | Other fee (specify) _____ |  |  |  | Other fee (specify) _____ |  |  |  | <b>SUBTOTAL (3)</b> |  |  | <b>(\$ )</b> |
|--|----------------------------|--|--------------------|----------|---------|---------|--------------------|--------|---------|---------|-------------------|--|---------|---------|------------------|--|---------|---------|--------------------|--|---------|--------|------------------------|--|---------------------|--|--|--------------------|--------------|-------|----------------|----------|----|---------|--------|------|--------------------|-----------|--------|------|---------------------------|--|---|--|---------------|---------------|-----------------|--------|-------|------------------------|--------|--------|-----------------------------------|---------|---------|--------------------------|--------|--------|---|--------|-------|---|--|----------------------------|----------------------------|-----------------|----------|---------|--------|-------------------------------------|--|--------|--------|---|--|---------|---------|---------------------------|--|-----------|-----------|--|--|----------|----------|--|--|------------|------------|---|--|---------|--------|--|--|---------|---------|---|--|---------|---------|--|--|-----------|---------|---|--|-----------|---------|--|--|---------|---------|------------------|--|---------|---------|--|--|---------|---------|--------------------------|--|-----------|-----------|---|--|---------|--------|----------------------------------|--|-----------|---------|------------------------------------|--|-----------|---------|--------------------------------|--|---------|---------|------------------|--|---------|---------|-----------------|--|---------|---------|-------------------------------|--|--------|--------|---|--|---------|---------|---|--|--------|--------|--|--|---------|---------|---|--|---------|---------|--|--|---------------------------|--|--|--|---------------------------|--|--|--|---------------------|--|--|--------------|
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description  | Fee Paid           |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 101 690  | 201 345                    | Utility filing fee   | 690.00             |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 106 310  | 206 155                    | Design filing fee  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 107 480  | 207 240                    | Plant filing fee   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 108 690  | 208 345                    | Reissue filing fee   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 114 150  | 214 75                     | Provisional filing fee   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| <b>SUBTOTAL (1)</b>  |                            |  | <b>(\$ 690.00)</b> |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| Total Claims   | Extra                      | Fee from below   | Fee Paid           |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 10   | -20 = 0                    | X 18 =   | 0.00               |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| Independent Claims   | 2 - 3 = 0                  | X 78 =   | 0.00               |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| Multiple Dependent Claims  |                            | X  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| Fee Code (\$)  | Fee Code (\$)              | Fee Description  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 103 18   | 203 9                      | Claims in excess of 20   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 102 78   | 202 39                     | Independent claims in excess of 3  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 104 260  | 204 130                    | Multiple dependent claim   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 109 78   | 209 39                     | Reissue independent claims over original patent                            |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 110 18   | 210 9                      | Reissue claims in excess of 20 and over original patent                    |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description  | Fee Paid           |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 105 130  | 205 65                     | Surcharge - late filing fee or oath  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 127 50   | 227 25                     | Surcharge - late provisional filing fee or cover sheet.                    |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 139 130  | 139 130                    | Non-English specification  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 147 2,520  | 147 2,520                  | For filing a request for reexamination                                     |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 112 920*   | 112 920*                   | Requesting publication of SIR prior to Examiner action                     |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 113 1,840*   | 113 1,840*                 | Requesting publication of SIR after Examiner action                        |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 115 110  | 215 55                     | Extension for reply within first month                                     |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 116 380  | 216 190                    | Extension for reply within second month                                    |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 117 870  | 217 435                    | Extension for reply within third month                                     |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 118 1,360  | 218 680                    | Extension for reply within fourth month                                    |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 128 1,850  | 228 925                    | Extension for reply within fifth month                                     |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 119 300  | 219 150                    | Notice of Appeal   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 120 300  | 220 150                    | Filing a brief in support of an appeal                                     |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 121 260  | 221 130                    | Request for oral hearing   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 138 1,510  | 138 1,510                  | Petition to institute a public use proceeding                              |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 140 110  | 240 55                     | Petition to revive - unavoidable   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 141 1,210  | 241 660                    | Petition to revive - unintentional   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 142 1,210  | 242 605                    | Utility issue fee (or reissue)   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 143 430  | 243 215                    | Design issue fee   |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 144 580  | 244 290                    | Plant issue fee  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 122 130  | 122 130                    | Petitions to the Commissioner  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 123 50   | 123 50                     | Petitions related to provisional applications                              |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 126 240  | 126 240                    | Submission of Information Disclosure Stmt                                  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 581 40   | 581 40                     | Recording each patent assignment per property (times number of properties) |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 146 690  | 246 345                    | Filing a submission after final rejection (37 CFR 1.129(a))                |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| 149 690  | 249 345                    | For each additional invention to be examined (37 CFR 1.129(b))             |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| Other fee (specify) _____  |                            |  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| Other fee (specify) _____  |                            |  |                    |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |
| <b>SUBTOTAL (3)</b>  |                            |  | <b>(\$ )</b>       |          |         |         |                    |        |         |         |                   |  |         |         |                  |  |         |         |                    |  |         |        |                        |  |                     |  |  |                    |              |       |                |          |    |         |        |      |                    |           |        |      |                           |  |   |  |               |               |                 |        |       |                        |        |        |                                   |         |         |                          |        |        |   |        |       |   |  |                            |                            |                 |          |         |        |                                     |  |        |        |   |  |         |         |                           |  |           |           |  |  |          |          |  |  |            |            |   |  |         |        |  |  |         |         |   |  |         |         |  |  |           |         |   |  |           |         |  |  |         |         |                  |  |         |         |  |  |         |         |                          |  |           |           |   |  |         |        |                                  |  |           |         |                                    |  |           |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |  |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |                     |  |  |              |

|                       |                      |  |      |                                 |                         |
|-----------------------|----------------------|--|------|---------------------------------|-------------------------|
| <b>SUBMITTED BY</b>   |                      |  |      | <b>Complete (if applicable)</b> |                         |
| Typed or Printed Name | Milad G. Shara, Esq. |  |      | Reg. Number                     | 39,367                  |
| Signature             |                      |  | Date | 5/31/00                         | Deposit Account User ID |